

The Commonwealth of Massachusetts
TOWN OF EGREMONT
BOARD OF HEALTH
Town Hall, P.O. Box 368
South Egremont, MA 01258

413.528.0182
fax 528.5465

APPLICATION FOR PERMIT TO INSTALL SEPTIC SYSTEMS

I hereby apply for a permit to install septic systems in the Town of Egremont. I attest:

- (1) that I am familiar with the requirements of Title V of the State Environmental Code regarding the installation of septic systems;
 - (2) that I have the appropriate equipment and skills needed for septic system installation;
 - (3) that my company will not undertake a new installation, alteration or repair without first making sure that the Town of Egremont Board of Health has been informed and has approved the proposed design and
 - (4) that I after an installation I will provide a Certification Letter, As-built plans and a current sieve analysis as is appropriate and
 - (5) that my installers have taken the Installer's Course from the Berkshire County Boards of Health Association (or Tri-Town Health Department) and have current Licenses.
- If I do not have a current BCBOHA License, I must obtain my permit in person from the Board of Health Office after an interview with the Health Department to determine my experience with septic installations.

Signed: _____

Name of Individual or Company: _____

Address: _____

Telephone: _____

Date of Application: _____ Fee Paid: _____ (\$50 with BCBOHA License, \$100 without.)

BCBOHA License # _____ (Please attach copy of this License)

License # _____

BCBOHA License # _____

Approved By _____ for the Board of Health

Conditions of Approval: _____

Date of Approval: _____